## Ability to Pay Questions

## For Individual, Revocable Trust and Sole Proprietorship Applicants

- 1. Read and complete the enclosed Certification Statement for Ability to Pay Information.
- 2. Complete the enclosed six-page Financial Data Request Form.
- 3. Provide copies of your three most recent federal income tax returns, signed and complete with all schedules and attachments, as filed with the Internal Revenue Service. If any of these tax returns were amended or audited, please provide complete copies of the amended returns in addition to the original returns.
- 4. **For sole proprietorships,** provide copies of the five most recent years of financial statements, complete with auditor's opinion, balance sheet, income statement, statement of cash flows and all notes. If audited statements are not available, please submit unaudited financial statements, including balance sheet, income statement, statement of cash flows and supporting notes and schedules.
- 5. **For sole proprietorships**, provide a copy of the financial statements for the current year to date and the prior year to date (same period one year ago), including balance sheet, income statement, statement of cash flows, and pro forma statement.
- 6. **For sole proprietorships,** provide bank statements covering the most recent twelvementh period, for any checking, savings, or other demand deposit accounts owned or controlled by the sole proprietorship.
- 7. Complete Items 1 (taxpayer information) and 7 (signature) of the enclosed IRS Form 8821.
- 8. Identify all property, casualty and/or liability insurance policies, and any other insurance contracts, held by you or your company from the time you or your company began operations at, or assumed ownership of (whichever occurred earlier), the Site property until the present. In identifying such policies, state:
  - a. The name and address of each insurer and of the insured;
  - b. The type of policy and policy numbers;
  - c. The effective dates for each policy; and,
  - d. The per occurrence policy limits of each policy.
- 9. Please provide a statement of the maximum amount that you believe you are financially able to pay to resolve your liability. You may express this amount as a one time, cash payment due within the next twelve months and/or, an estimate of the amount you could pay in annual instalment payments spread over the next five (5) years.
- 10. Please provide any additional information which may be relevant in evaluating your ability to pay.